

RESOLUTION BY:

FINANCE/EXECUTIVE COMMITTEE

02-*ℓ*-2018

**AUTHORIZING REFUNDS FOR THE OVERPAYMENT OF BUSINESS
LICENSE FEES TO SAVE RITE GROCERY STORE #2726, ACCOUNT
#004918LGB, IN THE AMOUNT OF \$16,264.25; AND FOR OTHER PURPOSES.**

WHEREAS, Save Rite Grocery Store #2726 has overpaid its business license fees and is due a refund which has been verified by the Business License Division.

NOW THEREFORE, BE IT RESOLVED BY THE COUNCIL OF THE CITY OF ATLANTA, GEORGIA that the Mayor or his designee be and is hereby authorized to issue a refund check to the following party in the amount indicated:

<u>ACCOUNT NAME</u>	<u>PAYEE</u>	<u>ACCOUNT NUMBER</u>	<u>AMOUNT</u>
Save Rite Grocery Store #2726	Save Rite Grocery Store #2726 P.O. Box 2209 Jacksonville, FL 32203 Attn: Calderwood	004918LGB	\$16,264.25

BE IT FURTHER RESOLVED that said refund shall be charged to and paid from:
FAC 1A01 529010 T31001.

BUSINESS TAX DIVISION

REFUND REQUEST FORM

Please process a refund on the following account:

ACCOUNT # & TYPE: 004918LGB

REFUND REQUESTED: Save Rite Grocery Store #2726

AMOUNT REQUESTED: \$16,264.25

CONFIRMED BY: _____

DATE: 9/13/02

TO BE COMPLETED BY PROCESSOR ONLY

DATE D/B TYPED: _____

D/B APPROVED BY: 
BODIFORD, JEROME


DONALDSON, GARY

DATE SENT TO ACCOUNTS PAYABLE: _____

CHECK DATE & NUMBER: _____

COMPLETED, COPIED & FILED: _____

Copies given upon request only

Comments:

REFUND REQUEST APPROVAL

Business Name: Smekite Grocery Store #2726

Account Number: 004918

REFUND AMOUNT: 16,267.25

EXPLANATION: Over payment

Submitted By: MAHALEY HURLEY, SUPERVISOR

DATE: 9/4/02

Mailing address:
P.O. Box 2209
Jacksonville, FL
32203
Attn: Caldwell

Approved By: Alice C. Hughes

Management: _____

BIA244

BUSINESS LICENSE INFORMATION SYSTEM
BILLING

DATE: 09/03/02

TIME: 15:05:58

BILL/ACCOUNT SUMMARY INQUIRY

LICENSE/TAX NO.: 004918 LGB BUSINESS NAME: SAVE RITE #2726
ACCOUNT STATUS: R C START DATE: 1980-01-01 END DATE:
LOCATION ADDRESS: 2020 HOWELL MILL RD NW
ATLANTA GA 30315 -

COMPONENT INFORMATION	BILL NO	Bill DATE	BILL DUE DATE	BALANCE DUE 7/8/9
RPT. DATE: 2002-01-01	558405	2002-08-01	2002-09-01	\$16,264.25
FILE DATE: 2002-07-31				
COMP. NO.: 000612209				
COMP. TYPE: REN				
CLASS: 2				
SIC CODE: 5411				
SIC DESC: GROCERS, RETAIL				
NO. EMPLS.: 55				
VOLUME: \$12,587,764.00				
4/5				

REMIT NO	REMIT TYPE	REMIT RELATED REMIT NO.	DATE ENTERED	REMIT AMOUNT 10/11
362010	PAY	362010	2002-08-14	-\$16264.25

CURRENT ACCOUNT BALANCE = -\$16,264.25

1=HELP 2= 3=PREV SCRN 4=COMP FRWD 5=COMP BKWD 6=MEMO LOG
7=BILL FRWD 8=BILL BKWD 9=DSPLY BILL 10=REMT FRWD 11=REMT Bkwd 12=PREV MENU



City of Atlanta
Business License Department

August 30, 2002

Subject: Refund request

Dear Jerome Bodiford,

On July 31 and August 1 of 2002 SaveRite Grocery Store # 2712 was doubled billed in the amount of \$12,016.19 (check # 006582752) on account #007854LGB. I am requesting a refund check to be sent to Winn Dixie Stores, Inc for this credit.

On July 31 and August 1 of 2002 SaveRite Grocery Store # 2726 was doubled billed in the amount of \$16,264.25 (check # 048147) on account # 004918LGB. I am requesting a refund check to be sent to Winn Dixie Stores, Inc for this credit.

Total amount of refund request is \$28,280.44. Please send check to the following address:

Winn Dixie Stores, Inc
License & Permits Department
PO Box 2209
Jacksonville FL 32203

Please, if you have any questions or need more information, contact Norma Westmorland at (904) 783-5573.

Thank you,


Harold I. Hopkins, Jr.
Assistant Secretary & Treasurer
Winn-Dixie Stores, Inc

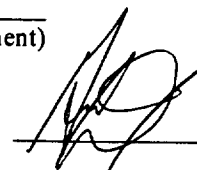


TRANSMITTAL FORM FOR LEGISLATION

To Mayor's Office:

Greg Pridgeon
(for review & distribution to Executive Management)

Commissioner's Signature: 

Director's Signature: 

From: Originating Dept: Finance/ Business License Contact (name): Jerome Bodiford 330-6431

Committee(s) of Purview: Finance Committee Committee Deadline: _____

Committee Meeting Date(s): _____ City Council Meeting Date: _____

CAPTION: A Resolution authorizing refunds for the overpayment of Business License fees to Save Rite Grocery Store #2726, account #004918LGB, in the amount of \$16,264.25; and for other purposes.

BACKGROUND/PURPOSE/DISCUSSION:

The overpayment was made on their Business License fees resulting from a duplicate payment. The Business has requested a refund of this overpayment.

FINANCIAL IMPACT (if any): Refund to be made from General Fund in the amount of \$16,264.25.

OTHER DEPARTMENT(S) IMPACTED: _____

Coordinated Review With: _____

Mayor's Staff Only

Received by Mayor's Office:

11/5/02
(date)

Reviewed: 

(initials)

(date)

Submitted to Council: _____
(date)

Action by Committee: _____ Approved _____ Adversed _____ Held _____
Amended
_____ Substitute _____ Referred _____ Other